

Attach ADR Sticker

ALLERGIES & ADVERSE DRUG REACTIONS (ADR)

Nil known Unknown (tick appropriate box or complete details below)

Table with columns: Drug (or other), Reaction/Type/Date, Initials

Complete hospital ADR and alert requirements

Sign Print Date

AFFIX PATIENT IDENTIFICATION LABEL HERE AND OVER LEAF

Med Rec. No: NOT A VALID PRESCRIPTION UNLESS IDENTIFIERS PRESENT
Surname:
Forename:
Gender: D.O.B.

1st Prescriber to print patient name & check label correct:

Weight (kg):
Date weighed: Gestational age at birth (wks):
Height (cm): Date:
B.S.A. (m²): Date:

BARCODE AS REQUIRED

REGULAR MEDICINES

Medication chart grid with columns for Date, Medicine, Dose, Frequency, Indication, and Discharge status.

BINDING MARGIN - DO NOT WRITE

NOT A VALID ORDER UNLESS LEGIBLE

Hospital Prescription

All doses need units of measure. eg mL, mg, unit, microgram
*Schedule 8 Medications for Discharge - Exact quantity must be specified.

REGULAR MEDICINES

Medication chart grid with columns for Date, Medicine, Dose, Frequency, Indication, and Discharge status.

RECOMMENDED ORAL ADMINISTRATION TIMES GUIDELINES ONLY
Morning, Night, Twice a day, Three times a day, Four times a day

REASON FOR NOT ADMINISTERING Codes MUST be circled
Absent, Not available, Vomiting, Fasting, Refused, Withheld, On-leave, Parent/Carer Administration, Self Administration

Tick if Slow release
SR=Sustained, modified or controlled release formulation.
If tablet is scored, then half can be given.
Dose must be swallowed without crushing.

Hospital Prescription

All doses need units of measure. eg mL, mg, unit, microgram
*Schedule 8 Medications for Discharge - Exact quantity must be specified.

WA Hospital Paediatric Medication Chart - Short Stay